# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
## (FOR USE WITH FORM PTO-875)

SERIAL NO. 10 / 521258

FILING DATE

APPLICANT(S)

## CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. | | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | | | 1 | | | | 51 | | | | | | |
| 2 | | | | | | | 52 | | | | | | |
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| 50 | | | | | | | 100 | | | | | | |
| TOTAL IND. | | ↓ | 4 | ↓ | | ↓ | TOTAL IND. | | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | | ← | 8 | ← | | ← | TOTAL DEP. | | ← | | ← | | ← |
| TOTAL CLAIMS | | | 12 | | | | TOTAL CLAIMS | | | | | | |

PTO-1360 (REV. 2/03)

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